Grimes Parks & Recreation De

Telephone: (515) 986-2143

Fax: (515) 986-2143

www.grimesiowa.gov



Grimes Rec Summer Cheerleading Clinic

Program Description:

The purpose of this camp is for the kids to learn basic cheers, jumps and dance techniques used in cheerleading. Students learn a cheer dance, a cheer, and work on jumps. Students will present their cheer and cheer dance to parents on the last day of the camp. Kids should wear shorts/tank top or leotard, and tennis shoes. No jean shorts or baggie t-shirts.

Who:	For Kids Ages 3	and un
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Where: Grimes Community Complex Gymnasium

Date: Session 1: Mondays & Wednesdays, June 4 – June 20, 2012

Session 2: Mondays & Wednesdays, July 9 – July 25, 2012

Time: Ages 3-5: 5:15pm – 5:45pm

Ages 6-8: 5:45pm – 6:30pm Ages 9+: 6:30pm – 7:30pm

Questions: Contact Brett Barber, Grimes Parks & Recreation Director

at bbarber@ci.grimes.ia.us or by phone at 986-2143.

To Register: ONLINE REGISTRATION IS AVAILABLE. Or you can pay with cash/check to **City of Grimes** and bring in registration to the Rec Office. OR Mail to 410 SE Main St. in Grimes, Iowa 50111

Cost: \$30 per child that includes a t-shirt	
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cut Here2012 "Grimes Rec Cheer Clinic" Registration Form									
PARTICIPANT'S N	AME: _						DOB	•	_ AGE:
PARENT/GUARDI	AN'S N	AME:							
STREET ADDRESS:				ZIP COI		DE:			
EMAIL:				PHONE:					
I would like to be add	led to th	e Grimes	s Parks aı	nd Rec Em	ail List:	YES	NO	ALREADY	ON LIST
T-Shirt Size (Circle):	YS	YM	YL	AS		AM	AL	AXL	
Please Circle:		Session	ı – June		OR		Sea	ssion 2 – Ju	ly
Please Circle:	Ages 3-	5	Aş	ges 6-8		Ages 9	and up		
Cost is \$30 per child	– includ	es a t-sh	irt.						

Release and Indemnification Agreement:

I hereby request that you accept my child's application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity. I will also allow pictures of my child during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature of Parent or Guardian	Data